Certification -Electronic Firm Application Submission Section 232

U.S. Department of Housing and Urban Development Office of Residential Care Facilities

OMB Approval No. 2502-0605 (exp. 03/31/2018)

Public reporting burden for this collection of information is estimated to average 2 hours. This includes the time for collecting, reviewing, and reporting the data. The information is being collected to obtain the supportive documentation which must be submitted to HUD for approval, and is necessary to ensure that viable projects are developed and maintained. The Department will use this information to determine if properties meet HUD requirements with respect to development, operation and/or asset management, as well as ensuring the continued marketability of the properties. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number.

Warning: Any person who knowingly presents a false, fictitious, or fraudulent statement or claim in a matter within the jurisdiction of the U.S. Department of Housing and Urban Development is subject to criminal penalties, civil liability, and administrative sanctions.

The information contained in this certification is required for the submission of application fees to HUD. The application fee is sent to HUD when the electronic version of the Firm Application is submitted (and project is placed in the queue).

To enter the ORCF Firm Application processing queue, please submit a completed, signed, version of this certification with evidence of payment for the FHA application fee, and your storage medium containing the electronic version of the Firm Application.

Project Name			
FHA Project Number			
Project City		Project State	
Loan Amount			
Indicate the appropriate application queue:			
			_
Program Type		Stage	
Application Queue			
			_
<u>Tax Credits:</u> The project involves Low Income Housing Tax Credits (LIHTC) or grants.			
Additional Comments: Any additional key identifying information that HUD needs to know about or			
start working on as soon as an application is submitted (e.g. Tribal Notification).			
C			
Common Ownership: (Complete only if the project is not part of a medium or large portfolio, but contains common control with other projects to be submitted within the previous or next 18 months or			
	Health Care Facilities. Guidance		
HB 4232.1, Section II, Chap			
•	,		
Portfolio Name			
Portfolio Number			
		ı	

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List the projects (project name and FHA #) with common ownership and application submission within the previous or next 18 months:			
List the projects (project name and FHA #) with common ownership and currently HUD insured:			
<u>Medium/Large Portfolios</u> : (Complete only if the project is part of a medium or large portfolio.)			
Portfolio Name			
Portfolio Number			
List the projects (project name and FHA Number) that are a part of this batch:			
<u>Lender Contact information</u> :			
Lender Contact Name			
Lender Contact Email			
Lender Contact Phone			
Certification:			
By signing this certification, I am certifying that to the best of my knowledge each application included in this submittal is completely assembled according to Office of Residential Care Facilities (ORCF) requirements (including any special requirements of the portfolio approval letter, if applicable).			
Executed this < <enter date="">> day of <<enter month="">>, <<enter year="">>.</enter></enter></enter>			
< <enter here="" lender's="" name="">></enter>			
By:			
Signature			

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(Printed Name & Title)

223a7 ALABAMA Alabama AL 223(f) ALASKA Alaska ΑK **New Construction** ARIZONA Arizona ΑZ Substantial Rehabilitation ARKANSASArkansas AR Blended Rate CALIFORNICalifornia CA 241a Supplemental Loan COLORAD(Colorado CO 223d Operating Loss Loan CONNECTI Connectic CT 232i Fire Safety Equipment DELAWARIDelaware DE FLORIDA Florida FL **Single Stage Submission GEORGIA** Georgia GΑ 2 Stage - Initial Submission HAWAII Hawaii ΗΙ IDAHO ID 2 Stage - Final Submission Idaho ILLINOIS Illinois IL Non-Portfolio INDIANA Indiana IN Portfolio IOWA Iowa IΑ Other KANSAS Kansas KS KENTUCKYKentucky KY No LOUISIANALouisiana LA Maine ME Yes MAINE MARYLANIMaryland MD MASSACHIMassachusMA MICHIGANMichigan MI MINNESO1MinnesotaMN **MISSISSIPFMississippiMS** MISSOURI Missouri MO MONTANAMontana MT NEBRASKANebraska NE NEVADA Nevada NEW HAMNew HamrNH NEW JERSINew JerseyNJ **NEW MEXINEW MexicNM NEW YORKNew York NY** NORTH CANorth CarcNC NORTH DANorth Dak(ND OHIO Ohio OH OKLAHOMOklahoma OK OREGON Oregon PENNSYLV PennsylvarPA RHODE ISLRhode Isla RI SOUTH CA|South CarcSC SOUTH DASouth Dak(SD **TENNESSEITennesseeTN TEXAS Texas** TX

UTAH

Utah

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VERMONT Vermont VT
VIRGINIA Virginia VA
WASHING WashingtoWA
WEST VIRCWest VirgilWV
WISCONSI Wisconsin WI
WYOMINGWyoming WY